## STATE OF NEW HAMPSHIRE

## 2018 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

## PLEASE PRINT

I. Name of Lobb	yist(s) Diana I	Reimer				<u> </u>
II. Name of lobb	yist's partnersh	ip, firm o	r corporation, if a	any:		
	(Name of partners	hip, firm o	r corporation)			<del></del>
1464 Morena Blvd.			San Diego		CA	92110
Business Address:	(Street)		(Town/City)		(State)	(Zip Code)
(540) 441-7227		(	)		e-mail dreimer@	cosaction.com
(Telepho	one)		(Fax	<b>()</b>	•	,
reportable exper	nse transactions	which are	file separate reports not attributable the months prior to	to any one o	elient).	ay file a separate report for  : : : telesting the content of the
Convention of	States Action				. : :	,
	(Full Name	of Client a	s it appears on the Lo	obbyist Regist	ration Form)	· · · · · · · · · · · · · · · · · · ·
<u>OR</u>						
unrelated to any p		ie lobbyis	t (including the lot	bbyist's fami	ly), or the lobbying	g.firm listed below which are
IV. Date of Repo	ort April 25, activity from date		tion to 3/31/18	activity fr	y 25, 2018 🔲 om 4/1/18 to 6/30/18	•
	October 3 activity from	•			uary 30, 2019 <b>X</b> com 10/1/18 to 12/31	/18
	ked, complete jus		nd no reportable i and submit it to th			he last report. X State House, Room 204,
VI. Check if add	itional reports a	re attach	ed:			
			iditures, you must 1	file Addend	um A- Fees and E	xpenses
☐ If you have p Expense Reimbur		n or reimb	oursed expenses, yo	ou must file	Addendum B– Re	port of Honorariums or
☐ If you, your f	īrm, or∙your fami	ly has ma	de political contrib	outions, you i	must file <b>Addend</b> u	um C- Political Contributions
Sworn Statemen I have read RSA and complete to the	15, RSA 15-B, R	SA 14-C a	ind RSA 664 and h	nereby swear	or affirm that the	foregoing information is true
(Signature of lob	byist)	Lane.	1 _	9 p 7,8	1/24/2 (Dat	(D) 9 (e) :
DIANIA (Print Name of Ic	NE M	ER	· · ·	, .		RECEIVED

JAN 3 1 2019